TO:USPTO



RECEIVED **CENTRAL FAX CENTER**

VLA FACSIMILE NO. (703) 872-9302

MAY 1 4 2004

PATENT H1T02 P-113

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner Applicant Shawntina T. Fuqua

Scrial No.

Imad Mahawili, Ph.D 10/074,287

Filing Date

February 12, 2002

Group Confirmation No. 3742 4900

For

ULTRA RAPID THERMAL PROCESSING

CHAMBER AND METHOD OF USE

Commissioner for Patents P. O. Box 1450 Alexandria VA 22313-1450

Dear Sir:

RESPONSE

In response to the Office Action mailed January 14, 2004, having a threemonth period of response ending April 14, 2004, Applicant submits a Petition and Fee for a one-month Extension of Time and wishes to amend his application as follows:

TO:USPTO

PATENT MIC04 P-113

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner

Shawntina T. Fuqua Imad Mahawili, Ph.D

Applicant

Group Art

3742

Serial No.

10/074,287

Filed

February 12, 2002

For

ULTRA RAPID THERMAL PROCESSING CHAMBER AND METHOD OF USE

Commissioner for Patents

P.O. Box 1450

Alexandria VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below:

CLAIMS AS AMENDED

Col. I **Small** Other Than A Col. 2 Col. 3 Entity Small Entity Claims Highest No. Previously Remaining Paid For After Present Add'l Add'l Amendment Ехtга Rate Fee Rate Fee ** 77 * 54 = 27x \$9 \$.00 Total Minus x \$18 \$.00 Claims * 7 *** 5 Independent Minus =2x \$43 \$.00 x \$86 \$172.00 Claims First Presentation of Multiple Dependent Claims \$145 \$ x \$290 \$.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$.00 \$172.00

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. I of a prior amendment or the number of claims originally filed.

Please charge the amount of \$172.00 and any additional fees or credit overpayment to Deposit Account No. 22-0190. A duplicate copy of this sheet is attached.

By: VAN DYKE, GARDNER, LINN & BURKHART, LLP

Catherine S. Collins Registration No. 37 599 P.O. Box 888695

Grand Rapids, MI 49588-8695

(616) 975-5500

CSC:lmsc